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<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/651,800-Conf. #2081
	Filing Date	August 30, 2000
	First Named Inventor	Simona Cohen
	Art Unit	2178
	Examiner Name	K. R. Stork
	Attorney Docket No.	06727/000H610-US0

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I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 25,351
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Signature

Typed or Printed Name

S. Peter Ludwig

Date 09/12/2007Telephone (212) 527-7770

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.